

NEW YORK HOSPITAL

Department of Psychiatry



Payne Whitney
Psychiatric Clinic
and
Interdepartmental
Psychiatric Service



ANNUAL REPORT

1935



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CORNER OF ENTRANCE LOBBY

NEW YORK HOSPITAL



INCORPORATED A.D. 1771
IN THE REIGN OF GEORGE III

Department of Psychiatry

PAYNE WHITNEY
PSYCHIATRIC CLINIC
AND
INTERDEPARTMENTAL
PSYCHIATRIC SERVICE

ANNUAL REPORT
1935

NEW YORK HOSPITAL DEPARTMENT OF PSYCHIATRY

The Department of Psychiatry of the New York Hospital consists of Bloomingdale Hospital in White Plains, the Payne Whitney Psychiatric Clinic and Out-Patient Service, and the inter-departmental co-operative service at the New York Hospital, 525 East 68th Street, New York City.

The following is the annual report for 1935 of the psychiatric service in New York City. The report of Bloomingdale Hospital is issued separately.

The department is conducted under the supervision and direction of the following committees of the Board of Governors:

Bloomingdale Committee

HENRY G. BARBEY, Chairman

AUGUSTINE J. SMITH, Secretary

PAUL TUCKERMAN

BARKLIE MCKEE HENRY

G. BEEKMAN HOPPIN

Ex-officio

BRONSON WINTHROP, Treasurer

Payne Whitney Psychiatric Committee

PAUL TUCKERMAN, Chairman

JOHN H. WHITNEY

BARKLIE MCKEE HENRY

HENRY G. BARBEY

G. BEEKMAN HOPPIN

Ex-officio

AUGUSTINE J. SMITH, Secretary

BRONSON WINTHROP, Treasurer

MEDICAL STAFF

General Psychiatric Director

WILLIAM L. RUSSELL, M.D.

Psychiatrist-in-Chief

GEORGE S. AMSDEN, M.D.*

* Retired July 1, 1935.

Consulting Psychiatrist

MORTIMER W. RAYNOR, M.D.**

** Deceased.

Attending Psychiatrists

GERALD R. JAMEISON, M.D. GEORGE W. HENRY, M.D.

GEORGE H. KIRBY, M.D.** HARRY M. TIEBOUT, M.D.***

*** Resigned March 9, 1935.

Assistant Attending Physician

CARL BINGER, M.D.

Consulting Physicians

(From Department of Medicine)

EDWARD CUSSLER, M.D. JOSEPH C. ROPER, M.D.

Attending Dental Surgeon

D. AUSTIN SNIFFEN, D.D.S.

RESIDENT STAFF

Chief Resident Psychiatrist and Clinic Executive

CHARLES DILLER RYAN, M.D.

Resident Psychiatrists

JOEL MILAM HILL, M.D.

B. MILDRED EVANS, M.D.

Assistant Resident Psychiatrists

BURTRUM C. SCHIELE, M.D.

HERBERT S. RIPLEY, M.D.

Junior Assistant Resident Psychiatrists

CHARLES RUPP, M.D.

WILLIAM B. SCOVILLE, M.D.

FRANK A. STRICKLER, M.D.

Assistant Psychiatrists

DANIEL F. BROPHY, M.D.

MILTON L. MILLER, M.D.

OUT-PATIENT SERVICE

Attending Psychiatrist

PHYLLIS GREENACRE, M.D.
(Chief)

Associate Attending Psychiatrists

WILLIAM H. DUNN, M.D. NORVELLE C. LAMAR, M.D.¹
(Assistant Chief)

Assistant Attending Psychiatrist

MARION STRANAHAN, M.D.⁶

Psychiatrists

EDWARD B. ALLEN, M.D. ²	ELMER KLEIN, M.D.
SMILEY BLANTON, M.D. ⁵	HELEN P. LANGNER, M.D.
PATRICK H. DREWRY, JR., M.D. ²	LESLIE E. LUEHRS, M.D.
LEWIS A. ELDRIDGE, M.D.	ALEXANDER R. MARTIN, M.D.
THOMAS H. HAINES, M.D.	CHARLOTTE MUNN, M.D.
DONALD M. HAMILTON, M.D. ²	HENRY ALDEN SHAW, M.D.
EMELINE P. HAYWARD, M.D. ⁶	GEORGE S. SPRAGUE, M.D. ²
MABEL HUSCHKA, M.D. ¹	HANS SYZ, M.D. ³
MURIEL IVIMEY, M.D. ³	JAMES H. WALL, M.D. ²
BILLY K. KELLER, M.D. ²	BETTINA WARBURG, M.D.
ELIZABETH KILPATRICK, M.D. ⁶	KATHERINE F. WOODWARD,
JOSEF KINDWALL, M.D. ^{2, 4}	M.D. ⁶

Assistant Psychiatrists

GEORGE H. GEROW, M.D. BENJAMIN SPOCK, M.D.⁶

Psychologist

DOROTHY P. MARQUIS, Ph.D.

Chief Social Service Worker

PHOEBE KEYES, A.B., M.A.

Director of Nursing

CAROLYNE A. SPROGELL, R.N.

Assistant Director of Nursing

ELIZABETH K. GIBSON, B.S., R.N.

Supervisors

ELEANOR CORRIGAN, R.N. LAURA FITZSIMMONS, R.N.

MARGARET JOINVILLE, R.N. ELIN FRIBERG, R.N.

ELEANOR LEWIS, B.A., R.N.

(Out-Patient Service)

Chief Occupational Therapist

PAULINE G. GUNDERSEN, Reg. O.T.

Chief Physical Therapists

M. E. HIBBLER

HARRY E. LAWSON, B.S., M.A.

Dental Hygienist

LOUISE P. HOFF, D.H.

Chief Dietitian

SUSAN N. PAIGE, B.S.

Housekeeper

ALMA K. ROSE

Assistant Executive

HUGH H. CREIGHTON, A.B., M. Arch.

¹ Special service in Pediatrics Department.

² Member of Bloomingdale Hospital Staff.

³ Consulting service in Medical Out-Patient Department.

⁴ Consulting service in Gastro-Enterology.

⁵ Speech Clinic.

⁶ Children's Division.



THE CLINIC BUILDING

ANNUAL REPORT OF PSYCHIATRIC SERVICE

To the Board of Governors of the Society of the New York Hospital:

Gentlemen:

The following is the third annual report of the psychiatric service in New York City and is for the year ending December 31st, 1935:

MOVEMENT OF POPULATION OF THE PAYNE WHITNEY PSYCHIATRIC CLINIC

	<i>Men</i>	<i>Women</i>	<i>Total</i>
Patients in residence, December 31st, 1934 ...	20	43	63
Admitted	81	154	235
Average Daily Number	16.3	44.5	60.8
Total Patients treated	101	197	298
Discharged	73	155	228
To Self	19	6	25
To Relatives and Friends	40	90	130
Transferred to Bloomingdale	6	21	27
Transferred to Other Hospitals	6	26	32
Transferred to General Hospital	2	6	8
Died	0	6	6
Results:—			
Recovered	9	12	21
Much Improved	11	12	23
Improved	30	69	99
Unimproved	23	56	79
Remaining December 31st, 1935	28	42	70
Capacity of Clinic (Adults)	42	46	88
Capacity of Clinic (Children)—(Temporarily not used)			23

The growth in activity of the service is shown by the increase in the number of applications for admission from 303 in 1934 to 364 in 1935, in the number of admissions from 184 to 235, and in the total number treated from 248 to 298. That the service is finding a larger place in the resources of physicians in private

practice is revealed in the increase in the proportion of applicants referred from this source from 68 to 77 per cent. Of the 228 patients discharged, 155 or 68 per cent returned directly to the community, 25 on their own responsibility, and 130 with relatives or friends. Patients discharged in this way were ordinarily advised to consult the physicians by whom they had been referred to the service. Twenty-four patients were removed by relatives contrary to advice. Some of these were regarded as suicidal. The menace of suicide continues to be one of the most difficult problems met with in the treatment of mental disorders, and is assuming the proportions of a serious social problem. Twenty of the patients discharged were transferred to state or municipal hospitals, 27 to Bloomingdale Hospital, 7 to other private benevolent hospitals, 5 to proprietary institutions, and 8 to general hospitals. Six patients died.

FORMS OF DISORDERS OF PATIENTS ADMITTED

<i>Diagnosis</i>	<i>Men</i>	<i>Women</i>	<i>Total</i>
Manic Depressive Psychosis:—			
Manic	3	12	15
Depressed	9	20	29
Circular	1	12	13
Psychoneurosis	9	17	26
Psychoneurosis with Depression	11	16	27
Involitional Melancholia	1	4	5
Schizophrenia	19	34	53
Psychopathic Personality	2	9	11
Paranoid State	1	9	10
Psychosis with Somatic Disease	4	10	14
Senile Psychosis	1	0	1
General Paralysis	2	0	2
Organic Brain Disease (3 tumors)	1	3	4
Epilepsy	1	0	1
Alcoholism	10	0	10
Intestinal Obstruction—no psychosis	0	1	1
Diagnosis Deferred	2	1	3
Diagnosis Undetermined	4	6	10

This abridged classification indicates the types and varieties of disorders for which the Clinic is resorted to.

TREATMENT

As psychiatric treatment consists of measures directed to the whole organism or personality, a statistical presentation comes far short of revealing its character and extent. It was discovered more than a century ago by Pinel, the founder of modern psychiatry, that it is necessary in hospital practice "to place first, in point of consequence, the duties of a humane and enlightened superintendency and the maintenance of order in the services of the Hospital." Much emphasis has, therefore, been placed on the maintenance in the Clinic of an orderly régime that would furnish a constructively social, occupational, recreational, and invigorating therapeutic atmosphere and force. This is considered to be of no less importance than the individual clinical study and treatment of the patients by all the means of scientific medicine and psychiatry.

The extent to which organized therapeutic measures were employed is shown in the administration of 6,484 prolonged baths and packs and of 3,397 treatments with other forms of hydrotherapy, of 900 treatments by massage, individual corrective and re-educational exercises, of 768 treatment by diathermy, lights, and sun baths, of 13,265 games, rhythmic, and indoor and outdoor exercises with and without apparatus. Dancing parties, musical and other entertainments, parlor games and social relationships had also an important place. The patients' library of 300 volumes, 100 of which were added during the year, is, although useful, far too small and unorganized to be used to best advantage as a therapeutic resource. By courtesy of the Director of the Metropolitan Museum of Art, parties of patients were given private views of the collections under the guidance of an instructor. An attractive exhibit of prints from the Museum was displayed at the Clinic. Many patients attended plays, operas, and other entertainments in the city. Some attended educational courses or resumed gainful employment while still under the guidance of the physicians and residing at the Clinic. Occupational therapy had a large place in treatment. The attractive workshops on the eighth floor exercise in themselves a wholesome, stimulating influence on those who visit them. A variety of crafts and other activities are engaged in,

and, as the occupational director says in her report, "only daily observation and study of the patient while at work can reveal the stimulus as well as the relaxation that can come to him from his work." The number of patients who engaged in occupational therapy was 283 or 95 per cent of the total number treated in the Clinic. The total individual treatments was 18,219, and the number of articles made was 4,324. The income from the Mansfield Fund established by the Helen C. Mansfield War Service Classes, makes it possible for patients who are unable to pay for the cost of materials to retain possession of the articles they make.

Adequate attention to the physical condition of the patients is indispensable in psychiatric as in medical practice generally. Although all the members of the medical staff are well trained physicians and physical examinations and treatments are part of the regular procedure, these examinations are supplemented by attending and consulting physicians, surgeons, and specialists from the other services of the hospital. Dr. Roper and Dr. Cussler of the Medical Department made 257 visits for this purpose, and 180 visits were made by other members of the medical, surgical, and specialty staffs. Also patients under treatment in the clinic made 137 visits to other services for examination and treatment.

The role of infection in the causation of mental disorders is recognized in various disorders, and as one source, the mouth and teeth receive careful examination and treatment in all cases. The number of dental procedures attended to was 1,337, on 149 patients. The dental hygienist also gave 704 sanitary and prophylactic treatments, and 151 x-ray films were taken.

The laboratories of the Clinic, to which all of the second floor is given over, were, owing to insufficient funds, utilized only to a limited extent. A half time technician is employed and 2,470 routine clinical tests were made. The central laboratories kindly furnished such additional attention as was needed for procedures requiring more equipment, skill and time than were available at the Clinic. The comparatively few x-ray examinations made were attended to by a technician from the Central Department who used the Clinic equipment. The extensive laboratories of the Clinic offer facilities for research in psychiatry that are too valu-



OCCUPATIONAL THERAPY DEPARTMENT

able properly to remain unused at a time when the pressing need for psychiatric research is so clearly recognized.

The Nursing Service of the Clinic is one of its strongest and most valuable means of treatment. It is fully manned by well trained psychiatric graduate nurses, men as well as women. The character of the social and individual treatment of the patients is largely dependent upon these nurses who determine the atmosphere and management of the services and co-operate with the physician in the observation, understanding, and guidance of the patients in their efforts at readjustment. The most difficult and delicate medical and psychiatric procedures on highly emotional and abnormally sensitized patients must be undertaken, and the highest skill of the general nurse must be supplemented by the understanding, poise, tact, patience, resourcefulness, and technical skill that are indispensable to psychiatric nursing practice. The discontinuance of the training of male nurses at Bloomingdale Hospital will eventually prove disadvantageous to the psychiatric service at the New York Hospital, as the Clinic has looked to this school for graduates for its service. It was also expected that a co-operative course would be established by which the general medical and surgical services of the hospital would have the advantage of the service of intelligent students from the Bloomingdale School who would be given a year's training in these services.

The Dietary Service of the Clinic is provided with a kitchen in charge of a specially trained dietitian. The number of meals served was 5,743. A daily average of 27 special diets was also prepared, and of 31 between-meal nourishments. The Nursery School was furnished 248 meals, and served with milk, orange juice and tomato juice besides. The dietary, as well as the domestic service generally, is a therapeutic resource in the treatment of emotionally disturbed, delusional, and sometimes desperately sick psychiatric patients that requires the same medical attention and control, as the more strictly technical medical and psychiatric services.

The previous occupations of the 235 patients admitted indicate adherence to the policy that has been followed in the psychiatric service of the New York Hospital for many years. Ninety-five, or 40 per cent of the patients were from the professions, 81, or

34.5 per cent, were from commercial groups, 26 were students in educational institutions, 5 were from the unemployed, and 9 were unclassified. Nineteen, about 7 per cent, were supported by income from investments. Fifty-seven (37 per cent), of the women were self-supporting.

OUT-PATIENT SERVICE

The activity of this service seems to have reached the saturation point of the present staff, and there was no increase during the year. The following statistical statement is a very inadequate presentation of the extent and character of the service:

	<i>Adults</i>	<i>Children</i>	<i>Total</i>
<i>New Applications</i>	621	225	846
Accepted for Examination and Treatment	572	225	797
<i>Sources of New Patients:—*</i>			
In-patient department of psychiatric clinic	1	0	1
Other departments of N. Y. Hospital	363	171	534
Private physicians	127	29	156
Hospitals and other medical organizations	17	8	25
Social agencies, schools and courts	29	8	37
Relatives, friends, self	83	10	93
<i>Diagnosis on New Accepted Cases:—</i>			
Psychosis	96	3	99
Psychoneurosis	344	14	358
<i>Without Psychosis:—</i>			
Epilepsy	6	0	6
Alcoholism	3	0	3
Mental Deficiency	11	49	60
Encephalitis	1	0	1
Psychopathic Personality	14	0	14
Others	11	16	27
Primary Behavior Disorders	24	135	159
Diagnosis Deferred	16	4	20
Examination incomplete or not yet examined ...	46	4	50
<i>Patients' Visits:—</i>			
Visits for Examination and Treatment	4,763	1,333	6,096
Visits for special physical examinations	127	1	128
Total visits	4,890	1,334	6,224

* Includes 49 cases that were declined.

There was an increase in the proportion of patients referred from other services of the Hospital from 46.5 per cent in 1934 to 63 per cent. Also the proportion of patients from outside

sources who were referred by physicians in private practice rose from 21 per cent to 50 per cent.

The outstanding problem of the service is to provide adequate treatment. There are 32 psychiatrists on the staff, an increase of 5 during the year. One is full time, two are half time. The others attend from one to three sessions a week. The following from the report of Dr. Greenacre, Chief of the Service, explains the situation:

"The clinic serves predominantly as a treatment clinic, with its diagnostic-consultative function secondary. In this it represents a definite advance over the past, when the psychiatric 'Dispensaries' were largely used for diagnostic purposes, to determine the degree of need for hospitalization. It is my concern that this treatment service for those who cannot afford private fees and who need help and guidance in personal problems, rather than the régime and protection of in-patient hospital care, should be well and faithfully carried out. The greatest obstacle still remains the procuring of doctors' services at frequent enough intervals (3 or 4 times a week) so that intensive therapy can be maintained. The establishment of an evening clinic from 5 to 7, three evenings a week, might do much to supplement the treatment needs of our present organization,—especially in caring for the small wage earner who needs help but is able to hold a job which precludes attendance at the regular clinic hours. The problem of sufficiently frequent staff attendance still remains with us, however."

The position of psychologist was advanced from half to full time service. The number of examinations made was 327, of which 17 were of patients in the Clinic, 266 in the out-patient service, 19 were in pædiatrics, and 25 were in the Nursery School.

The Nursery School has enrolled 18 children since the opening of the session. The continued support of Mrs. Barklie Henry has permitted the employment of an additional teacher for the purpose of giving more time to observation and recording, and the purchase of a moving picture apparatus for recording the activities and behavior of the children. A brief descriptive circular explaining the policy and purposes of the school has been issued.

Three social service workers are now provided for the out-patient work. One was added during the year. The number

MEN'S LOUNGE



of interviews recorded was 2,693, and 240 visits away from the Hospital.

CHILDREN'S SERVICE

The psychiatric study and treatment of children with special reference to its significance to the nature and development of adult disorders is a comparatively recent undertaking. It is, therefore, peculiarly unfortunate that funds are still unavailable for the much needed in-patient service for children for which there are such admirable facilities in the Clinic building. A foundation has, however, been laid for a sound development in out-patient work for children by the appointment of a well qualified child psychiatrist on a half time basis and of five qualified assistant psychiatrists each of whom attends from 2 to 3 half-day sessions a week. The Commonwealth Fund has also extended more liberal support for Dr. LaMar's work in co-operation with pædiatrics, permitting the appointment of a full time assistant psychiatrist. The number of children's visits to the out-patient service was 1,334 and 225 new cases were accepted, of which 171 were from other services of the Hospital.

INTERDEPARTMENTAL RELATIONS

The establishment of psychiatric service in close proximity to the other services of the New York Hospital affords a most favorable opportunity for the development of mutual understanding and relationships. The peculiar nature of psychiatric disorders, the personality problems they present, and the special provision in construction, organization, and administration required in their treatment are so different from what is met with, and is of most concern, in other forms of medical study and practice that physicians who are not psychiatrists are not well informed concerning them. This barrier is, however, gradually giving way to the spirit of mutual helpfulness that prevails between departments, the constant interchange of consultation service, and the influence of psychiatric teaching and research which are engaged in in medical and surgical services as well as in the specialized psychiatric service. Considerable headway has been made in establishing these relationships. Consultations and co-operative treatment in psychiatry from other services

were furnished in 574 instances in the in-patient service and in 67 in the out-patient service. Consultation and co-operative treatment were furnished to other services by psychiatry in 255 instances in the in-patient service and in 838 instances in the out-patient service. In regard to the former, Dr. Henry, in his report, comments as follows:

"There is abundant opportunity for more teaching, research work, routine consultations, aid in therapy and particularly in the prevention of serious maladjustment. A larger consulting staff, better organization and better cooperation between departments would greatly facilitate the psychiatric contributions to general medicine and give psychiatrists a better understanding of personality disorders."

MEDICAL STAFF

In a new organization several years must be spent in building up service organization, standards, and stability, as a base for advances in education and research. Lack of adequate funds and a scarcity of well qualified candidates for important positions also retard advancement. Progress is, however, being made. Dr. Henry has continued his studies of the psychiatric problems of thyroid and menopause cases in co-operation with the endocrinological service.

The following books and papers relating to these and other psychiatric topics have been prepared by Dr. Henry:

The Teaching of Psychiatry in the General Hospital.

Proceedings of Conference on Psychiatric Education,
The National Committee for Mental Hygiene, Inc. May
1935.

Essentials of Psychopathology. Text book for medical students and physicians.

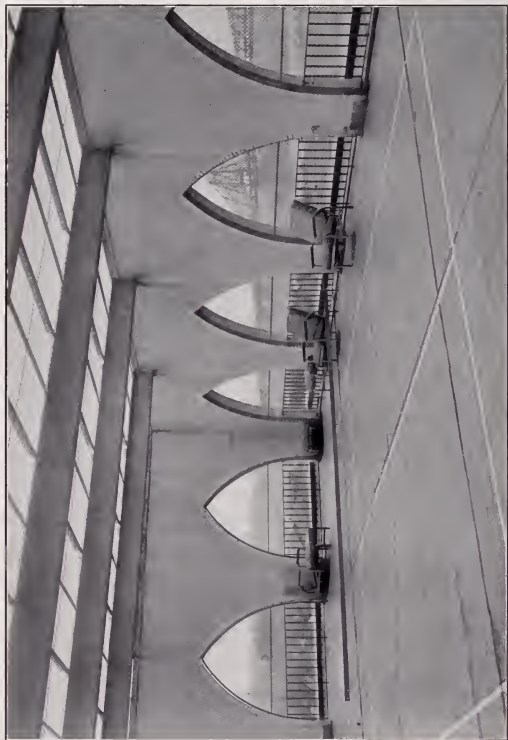
William Wood & Co., Baltimore, Md. Nov. 1935.

The following papers were read at scientific meetings:

Modern Trends in the Treatment of the Mentally Sick.
International and Spanish Speaking Association of Physicians.

Psychic Factors in Thyroid Disease.

Medical Society of the County of New York.



RECREATION ROOF TERRACE

Heredity and Environment. A Study of a Psychotic Family.
Combined Meeting of The New York Neurological Society and the Section of Neurology and Psychiatry of the Academy of Medicine.

Menopause Syndromes. Problems in Etiology and Therapy.
New York Society for Clinical Psychiatry.

Papers have also been prepared for publication by other members of the staff. At a meeting of the New York Society for Clinical Psychiatry, held at the Clinic on November 14, 1935, the program was provided by members of the staff as follows:

I. Menopause Syndromes

Problems in Etiology and Therapy by Dr. Henry
Case Presentations by Dr. Henry and Dr. Hill

II. Case of Multiple Fugues by Dr. Brophy

The usual staff conferences have been held three times a week; also the daily morning administrative conference. A little progress has been made towards accumulating a psychiatric library. Eighty-two volumes have been added during the year. An opportunity has been presented for securing one of the most complete private collections of psychiatric literature in this country at a cost of \$25,000. This would be an extremely valuable acquisition, and it is hoped that funds will become available. The committee on Sex Variants has made arrangements for the physical and mental study at the Clinic of 100 cases by members of the New York Hospital staff.

EDUCATION

When the Payne Whitney Clinic was established, some doubt was expressed concerning the effect of the policy in regard to the class of patients received on the character of the Clinic as a teaching facility. The experience of three years in the teaching of medical students has tended to dispel this doubt. Third year students are given instructions in the in-patient service and fourth year students in the out-patient service. Several members of the resident staff participate in this instruction. The large and varied clinical resources of the State Hospital on Ward's Island are also utilized for weekly clinics for both classes. It can be plainly seen also that psychiatry is not merely a spe-

cialty, but is a form of medical thought and practice that should have a place in the study and treatment of all forms of illness. Students are, therefore, given psychiatric instruction in the medical and surgical services of the Hospital where psychoneurotic and personality problems and reactions are constantly met with. Graduate education for physicians has not yet been well organized, but is gradually taking form in the instruction and practice of the resident staff. The psychiatric department of the New York Hospital at White Plains may be included in the facilities available for this purpose and for scientific investigation. The psychiatric co-operative service in pædiatrics and the Nursery School have also a place among the educational resources.

The Clinic was, as heretofore, utilized for nursing education. Thirty-two students of the Hospital School of Nursing received a four months' period of instruction and practice in psychiatric nursing. Two weeks of the course were devoted to occupational therapy, the value of which was evidently recognized by the students some of whom expressed regret that it had not yet been introduced in the other services of the Hospital. The students were also given instruction and practice for two weeks in the use of physical exercises, games and other recreational activities in the treatment of the convalescent. Two weeks were spent in the out-patient service including the Nursery School. Eight graduates of general hospital schools of nursing were received for a course of eight months or a year in psychiatric nursing. This course also includes three weeks of occupational therapy, three weeks of physical and recreational therapy, and three weeks in the out-patient service. Eight nurses from the post-graduate courses at Bloomingdale Hospital were also received for two weeks of observation and instruction in the out-patient service.

ORGANIZATION AND ADMINISTRATION

The Payne Whitney Psychiatric Clinic has been in operation for three and a quarter years. The Clinic is the realization of a plan of psychiatric development that had been under consideration for many years and was outlined in definite form in 1925. The object was to provide in New York City a psychiatric service that would be more accessible than that at White Plains—Bloomingdale Hospital—and in closer relations with the other

services of the New York Hospital. It was also anticipated that a service thus located could be more readily utilized for educational and research purposes in co-operation with a medical college.

In the construction of the Clinic, and in its organization and administration, the policies, standards, forms, and methods, that have been developed in the long experience at Bloomingdale have been closely adhered to. These are in accord with sound, well-tried psychiatric principles and practice. They differ so much, however, in important particulars from those of the other departments of the Hospital, that entire conformity with the general scheme of organization and administration adopted in association with Cornell Medical College is found to be inadvisable. In fact, the spirit and purpose of the Clinic and the policies and methods that must be followed in its operation are more closely allied with those of Bloomingdale.

The plan of organization and administration provides, therefore, a larger degree of independence of the central administration. A specially qualified director appointed by the Board of Governors, is directly responsible to the Committee of the Board that is also in charge of Bloomingdale, as well as to the head of the department. He has, under the general direction of the head of the department, control of the personnel and of all the administrative and medical and nursing services of the Clinic, and is required to devote his whole time to the task.

There can be little doubt that the psychiatric facilities of the New York Hospital in its association with Cornell Medical College are remarkably extensive and of exceptionally high character. There is, however, much to be done before they reach their full possibilities and nothing can be more important in their further development than to adhere closely to the sound lines that have always characterized the psychiatric service of the Hospital since its earliest establishment 128 years ago.

FINANCIAL

The income of the department, derived from endowment, grants from the Commonwealth Fund and from Mrs. Henry, and the receipts from patients, has been sufficient for current expenses during the year. Every effort has been made to practice careful



CORNER OF GARDEN

economy, and many expenditures that would have been of advantage to the work and its further development have been deferred.

Particular mention may be made of the unused laboratories, the vacant children's department, the empty shelves in the library, in an appeal to the benevolently disposed who desire to contribute in an effective way to the advancement of psychiatry and mental hygiene.

CONCLUSION

The department is distinctly poorer through the loss by death of Mr. Powell, Dr. Raynor, and Dr. Kirby who for years had given a full measure of service, wise counsel and encouragement to the psychiatric organization and work.

Acknowledgment must again be made of the fine service rendered by the members of the medical, nursing, and other staffs of the department; also for the co-operative and skilled attention received from the other departments of the Hospital. Finally, the support, wise guidance, and encouragement of the Payne Whitney Psychiatric Committee and of your honorable Board have continued to furnish the inspiration and driving power that have made possible the success with which the department is operated.

Respectfully submitted,

WILLIAM L. RUSSELL, M.D.

General Psychiatric Director

